REMARKS

In the Office Action of dated February 1, 2007 claims 1 to 20 are pending of which claims 11 to 15 were rejected and 1 to 10 and 16 to 20 were withdrawn from consideration.

In particular;

- Claim 11 is rejected under 35 USC 102(e) as being anticipated by Greenberg et al (US 7,160,318)
- Claims 11 to 15 are rejected under 35 USC 102(b) as being anticipated by Papazolgou et al (US 6,524,336)

In the claim amendments:

Claim 11 is amended to clarify the terminology. The words "to form the composite prosthesis" added in line 8 of claim 1 are supported by the description at pages 9 and 10. The words "and a smooth surface of one portion engaging with a smooth surface of the other portion to provide a seal therebetween" added in the last two lines of the claim are supported by the description on page 13 lines 4 to 11. We submit that in making these amendments no new subject matter has been added.

Claims 12 to 15 are amended to clarify and make consistent the terminology and to remove superfluous wording. We submit that in making these amendments no new subject matter has been added.

New claim 21 is added. New claim 21 defines the invention as disclosed. We submit that this claim does not include any new subject matter. Support for the tubular body of graft material can be found on page 8 line 17. Support for "providing a smooth external surface of the graft material" can be found on page 8 lines 28 to 31. Support for "providing a smooth internal surface of the graft material" can be found on page 9 lines 1 to 6. To maintain the claim count, claim 6 is being cancelled without prejudice.

Claim 11 is rejected under 35 USC 102(e) as being anticipated by Greenberg et al (US 7,160,318).

Greenberg discloses a modular stent graft assembly which has an aortic section and a iliac section. In general there is a single form of aortic section and two options (Figure 4) or three options (Figure 6) for the iliac section. In each case the aortic section has an external stent at the connecting region between the two sections. See column 4 lines 60 to 62;

> "stents 44, 46 being secured about the outer surface of the graft material 36".

All of the iliac sections have an internal stent at the connecting region between the two sections. See column 6 lines 43 to 46;

> "the proximal and distal end portions of the iliac tubular grafts14a, 14b, 14c of FIG 6 have respectively a proximal most and a distal-most stent 56, 58 affixed internally of the graft material".

This specifically disclosed construction means that the aortic section of the modular stent graft of the disclosure of Greenberg must be deployed first and then the iliac section must be deployed second so that the connection end of the iliac section is inside the connection end of the aortic section. As can be seen in Figure 1 of Greenberg there is one stent overlap between the aortic and iliac sections so that the smooth outer surface of the iliac section engages the smooth inner surface of the aortic section to provide a seal between the two sections. If the iliac section were to be inserted into the aortic section with a two stent overlap the smooth outer surface of the iliac section would engage the smooth inner surface of the aortic section to provide a seal between the two sections. If an attempt was made, however, to deploy the iliac section first and the aortic section was then deployed within it, then regardless of whether there was a one or two stent overlap the inner surface of the iliac section with a stent on it would engage the outer surface of the aortic section with a stent on it and a seal would not be obtained between the two sections.

The prosthesis of the present invention is defined as having at

least one self expanding stent on an inside surface thereof at each end of each of the first and second portions which is structurally different than that of Greenberg and which has a distinct technical advantage. As discussed in the description of the present invention;

> "The ability to deploy with the connecting end either inside or outside means that the either the first or second prosthesis portion can be deployed first and then the other one deployed inside it. This gives a physician considerable flexibility and means that a hospital can have a stock of prostheses which can be readily assembled depending upon the observed vasculature."

As discussed above the modular stent graft assembly of Greenberg cannot be used in either configuration.

We submit that there is a distinct and important structural difference of the present invention and hence the present invention is not anticipated by Greenberg et al (US 7,160,318).

Claim 11 is rejected under 35 USC 102(b) as being anticipated by Papazolgou et al (US 6,524,336).

Papazolgou et al discloses an endovascular graft which is comprised of a main graft (1) and two peripheral cylinders (7). The teaching of Papazolgou et al is that the connecting parts of the components are of very different diameters, to the extent that two of the peripheral cylinders fit into the joining end of the main cylinder. There is no teaching in Papazolgou et al of:

> "...each connecting end comprising the same outside diameter as the other connecting end..."

as is defined in claim 11 of the present application.

There is also no teaching in Papazolgou et al of some of the stents being outside and some being inside of the graft material. At column 6 lines 33 to 54 it is stated that:

> "The inner or outer surface of the man cylinder 1 is covered by an inner/outer surface tube 3 to form a graft ...".

The peripheral cylinders have an outer tube:

"Each skeleton 7 is covered at its external surface by an outer surface skeleton tube 6 ...".

There is no teaching in Papazolgou et al of:

"...plurality of self expanding stents on an outer surface thereof along the length of each portion and at least one self expanding stent on an inside surface thereof at each end of each portion ..."

as is defined in claim 11 of the present application.

The Examiner has referred us to Column 6 lines 47 – 65 but the teaching there is of all of the stents being on the inside of the tube and not, as is defined in claim 11, the majority of the stents being on the outside and the stents only at each end being on the inside. There is in fact an advantage in a majority of the stents being on the outside because they provide less obstruction to the flow of blood through the prosthesis and do not provide points for build up of thrombosis. See page 8 lines 26 to 28:

" ... the external zig zag stents provide a smooth inner surface for the flow of blood through the prosthesis ...".

We submit that there are distinct and important structural differences in the present invention and hence the present invention is not anticipated by Papazolgou et al (US 6,524,336).

Claims 12 to 15 are rejected under 35 USC 102(b) as being anticipated by Papazolgou et al (US 6,524,336).

We submit that these claims depend from a novel and not anticipated claim 11 as discussed above and hence that these are also not anticipated by Papazolgou et al (US 6,524,336).

The re-examination and reconsideration of this application is respectfully requested and it is further requested that this application be passed to issue.

Although the foregoing discussion is believed to be dispositive of the issues in this case, applicants' attorney requests a telephone

interview with the Examiner to further discuss any unresolved issues remaining after the Examiner's consideration of this amendment.

Respectfully submitted,

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